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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)												
	Reynolds, Joseph, , , (b) Address (number and street) 5225 Parkside Drive		☐ Check if address changed					Candidate's FEC Identification Number S0SC00297					
	(c) City, State, and ZIP Code			3. Is This		New			Amended				
	North Charleston		SC 29405					(N)	OR		(A)		
4.	Party Affiliation	5. Office Soug	ght		6. State & Dis	trict of Candid	date						
	REPUBLICAN PARTY	Senate			SC	00							
	I	DESIGNATIO	N OF PR	INCIPAL	CAMPAIG	N COMMI	TTEE						
7.	hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)												
	NOTE: This designation should be filed with the appropriate office listed in the instructions.												
	(a) Name of Committee (in full)												
	Friends of Joe Re	ynolds											
	(b) Address (number and street) 5225 Parkside Drive												
	(c) City, State, and ZIP Code												
	North Charleston				SC	29403	3						
8.	(Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.												
	(a) Name of Committee (in full)												
	(b) Address (number and street)												
	(c) City, State, and ZIP Code												
	I certify that I have	examined this Sta	tement and to	the best of n	ny knowledge a	and belief it is	true, con	rect an	d comple	ete.			
Si	gnature of Candidate		D				Date -						
Re	ynolds, Joseph, , ,			04/02/2019									
NC	OTE: Submission of false, erroned	ous, or incomplete	information n	nay subject th	e person signi	ing this Stater	ment to pe	enalties	of 2 U.S	S.C. §4	37g.		

FEC FORM 2 (REV. 02/2009)